2015 - 10 - 15 - 08 - 00027459

FE6AN026

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

RECEIVED FEC MAIL CENTER

2015 OCT 15 AM 9: 25

									Office U	se_Only	
1.	NAME (OF TTEE (in full)	ТҮР	E OR PRINT ▼		ample: If ty	, ,, ,,	12FE4N	15 	İ	
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L		n previously orted. (ACC)	ľΚ	ANSIGS	1C1:17171			MO	6.4.	<u>/5,3</u>]	
2.	FEC ID	ENTIFICATIO	N NUMB	ER ▼	CITY 🛦			STATE A		ZIP CODE A	
	C0	0547	3,9,8		3. IS THIS REPORT	XI	NEW (N) OR	8 6	AMENDED (A)		
4.	TYPE (Choose	OF REPOR	Τ (b) Monthly Report	Feb 20 (M2		May 20 (M5)] A	ug 20 (M8)	Nov 20 (Non-Elec Year Only	tion
	(a) Qua	arterly Reports:		Due On:	Mar 20 (M3)		Jun 20 (M6)	s	ep 20 (M9)	Dec 20 (Non-Elec Year Only	(M12)
	Prong.	April 15			Apr 20 (M4)		Jul 20 (M7)		ct 20 (M10)	Jan 31	
	IJ	Quarterly Rep	ort (Q1)	(c) 12-Day	П	Primary (12	2P)	Genera	al (12G)	Runoff ((12R)
		July 15 Quarterly Rep	ort (Q2)	PRE-Elec Report fo	Pro-S	Convention	(120)	Specia	ıl (12S)		
	X	October 15 Quarterly Rep	ort (Q3)	-	L	ired rek vidual	lui	e de la companya del companya de la companya del companya de la co	v.o.d	Minor	وجعد للطور
		January 31 Year-End Rep	ort (YE)		Election on	M. F. W.	/ 0 0 /	······································	<u> </u>	in the State of	
	IJ	July 31 Mid-Ye Report (Non-e Year Only) (M	election	(d) 30-Day	L. I	General (30	0G)	Runoff	(30R)	Special	(30S)
		Termination R (TER)	eport	Report fo	r the:	"m * n'"	/ b * b * / [ጉ የተቀማ	٧٠/	in the	Pr = 4
			<u> </u>		Election on	Lakard	السما	راهميمان	.]	State of	<u>ــــــــــــــــــــــــــــــــــــ</u>
5.	Covering	g Period	67	1011/12	0.15	through	09	30	50)'S\	
	-			port and to the	best of my kno	wledge and	1			e.	
Тур	e or Prin	Name of Trea	asurer	KCK	Hbcll //	,_Ass	+)?	es she	RCR		
Sig	nature of	Treasurer	12		MALE	\	D	ate / (51/2	ål' žŏ/	**************************************
NO.	TE: Subm	ission of false,	erroneous,	or incomplete inf) ormation may si	ubject the pe	erson signing th	is Report to	the penaltie	es of 2 U.S.C. §4	l37g.
_		fice							FEC	FORM 3X	_
L		se nly							R	ev. 12/2004	

2045-40-45-04-00027460

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name Private Lenders PAC (APL-PAC) 0.71 0.11 2015 09/30/2015 To: Report Covering the Period: From: **COLUMN A** COLUMN B **This Period** Calendar Year-to-Date (a) Cash on Hand January 1, (b) Cash on Hand at Beginning of Reporting Period..... (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) Total Disbursements (from Line 31)......

Cash on Hand at Close of Reporting Period

(subtract Line 7 from Line 6(d)).....

Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)

10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)

Andrew Sandram Sandram Sandram Sandram	,]
0	1

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

1015 - 10 - 15 - 08 - 00027801

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004) Page 3 Write or Type Committee Name e-dres PAC Hssocia 0 Report Covering the Period: From: To: **COLUMN A COLUMN B** I. Receipts **Total This Period** Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)..... (ii) Unitemized (iii) TOTAL (add Lines 11(a)(i) and (ii)...... (b) Political Party Committees (c) Other Political Committees (such as PACs)..... (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)▶ 12. Transfers From Affiliated/Other Party Committees..... 13. All Loans Received 14. Loan Repayments Received..... 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)..... 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees..... 17. Other Federal Receipts (Dividends, Interest, etc.)..... 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account (from Schedule H3)..... (b) Levin Funds (from Schedule H5) (c) Total Transfers (add 18(a) and 18(b)).. 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))........ 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ▶

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

	II. Disbursements	Total This Period	Colondar Voor to Date
21.	Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4)	Paradicipal Property of the Control Property of the Co	Calendar Year-to-Date
	(i) Federal Share	Do do An An to the An to t	0
	(ii) Non-Federal Share		
	(b) Other Federal Operating	the all and reduced to describe reliance transfer all and re- prospersion of the special respective and analysis of the re-	karakturud olikusuk matasudbusuta itsi 1997 olik m pelangu mpamapangi magpanganti, magpasi (magpasi p
	Expenditures		0
	(c) Total Operating Expenditures	Activity and manufacturing advantages of application of the grant and application of the grant and applications of the grant a	Security of the second of the
	(add 21(a)(i), (a)(ii), and (b)) ▶	0	
22.	Transfers to Affiliated/Other Party	man animativate of a singuity and at and	
23.	Contributions to	het man trabate de man de la Col	and the state of t
	Federal Candidates/Committees and Other Political Committees	0	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	Independent Expenditures		A STATE OF THE PARTY OF THE PAR
25.	(use Schedule E)	2	
	(use Schedule F)	0	
00	Lass Banayasanta Mada	0	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
20.	Loan Repayments Made		
	Loans Made		0
28.	Refunds of Contributions To: (a) Individuals/Persons Other		
	Than Political Committees	0	0
		1	
	(b) Political Party Committees		
	(c) Other Political Committees (such as PACs)	0	\mathcal{O}
	(3001 83 1 703)	water who allowed watered bank and see him have	hand and will be with million the will be the second
	(d) Total Contribution Refunds	process and an expension of the magnetic sector of the sector	pane y sargula ng rinngasang sangne ng i ringaring i nagnening
	(add Lines 28(a), (b), and (c))▶	0	0
		and the standard and and and and and and and and and an	
29.	Other Disbursements	best death absorbed at markets and	
30.	Federal Election Activity (2 U.S.C. §431(20))		
	(a) Allocated Federal Election Activity		
	(from Schedule H6) (i) Federal Share	I was a sure of	
	(i) receial Share	make and to the state of the st	which has been a supposed to the second of the second
	(ii) "Levin" Share		
	(b) Federal Election Activity Paid Entirely	కా కార్డ్ సాన్ చారికిన్నారి. కోటు చేస్తాని కేంద్ర కోటు ఎన్నూర్లో ఉన్న సినిమా మార్క్ సిన్మార్లు కార్డ్ క	The Control of Market Control of the Control of Control
	With Federal Funds	0	0
	(c) Total Federal Election Activity (add		
	Lines 30(a)(i), 30(a)(ii) and 30(b))▶	La that the ran territories of	Latinate of the Contract of the
31.	Total Disbursements (add Lines 21(c), 22,	 ★ Section (1) Section (2) Section (2) Section (3) 	entre de la companya del companya de la companya del companya de la companya de
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	0	O
32.	Total Federal Disbursements		
	(subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	I was a grant of the	6
	1011 Line 01/1	$\mathbf{I}_{\mathbf{A}}}}}}}}}}$	1

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans)	1	And the second of the second o
(from Line 11(d), page 3)	the state of the same and a state of the	O San Market Burger of the State of the Stat
34. Total Contribution Refunds	7	
(from Line 28(d))	0	O
35. Net Contributions (other than loans)	The state of the s	The state of the state of the state of the state of
(subtract Line 34 from Line 33)	0	0.00
36. Total Federal Operating Expenditures	and the first first free free free free free free free fre	The state of the s
(add Line 21(a)(i) and Line 21(b))	O	0
37. Offsets to Operating Expenditures	Against many and in all manhaged mind and and any of against all a grant and a second a second and a second and a second and a second and a second a	The state of the second se
(from Line 15, page 3)	0	
38. Net Operating Expenditures	 It is discount in the continued and addition of a continued interference and are provided as a finite continued and are provided as a finite continued as a finite	Basin San Bertal Sandanahan 1875-ah - Labi - Chilli III - Basin James - Address Marketta April 1971 - Address Angel 1971
(subtract Line 37 from Line 36)	O	6
(Odditate Ento Of Holli Ento Oo)	handa and and and a straight a hander of the band	بدهيد كدار ليسن الراسطان لايد المتدالية بالراسل

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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS			Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE / OF / (check only one) 11a 11b 11c 12 13 14 15 16 17		
	ny information copied from such Reports and St					
NAME OF COMMITTEE (In Full) American Association of Pr						
Α.	Full Name (Last, First, Middle Initial)			Date of Receipt		
,	Mailing Address			Mark of Hecept		
	City	State	Zip Code	Amount of Each Propint this Povint		
	FEC ID number of contributing federal political committee.	c ,		Amount of Each Receipt this Period		
	Name of Employer	Occupation				
	Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼			
_	Full Name (Last, First, Middle Initial)					
В.	Mailing Address			Date of Receipt		
	City	State	Zip Code	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C .		Amount of Each recept this relied		
	Name of Employer	Occupation				
	Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼			
_	Full Name (Last, First, Middle Initial)			Day of Bassis		
C.	Mailing Address			Date of Receipt		
	City	State	Zip Code			
	FEC ID number of contributing federal political committee.	CI:		Amount of Each Receipt this Period		
	Name of Employer	Occupation		1		
	Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼			

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

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2015
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<u>0</u>

SCHEDULE B (FEC Form 3X) PAGE OF FOR LINE NUMBER: Use separate schedule(s) (check only one) ITEMIZED DISBURSEMENTS for each category of the 21b 22 26 **Detailed Summary Page** 27 28a 28c 30b Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Le-ders Full Name (Last, First, Middle Initial) Date of Disbursement Mailing Address City State Zip Code Purpose of Disbursement Amount of Each Disbursement this Period Candidate Name Category/ Type Office Sought: House Disbursement For: Primary Senate General President Other (specify) State: Full Name (Last, First, Middle Initial) В. Date of Disbursement Mailing Address City State Zip Code Purpose of Disbursement Amount of Each Disbursement this Period Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General President Other (specify) State: District: Full Name (Last, First, Middle Initial) C. Date of Disbursement Mailing Address City State Zip Code Purpose of Disbursement Amount of Each Disbursement this Period Candidate Name Category/ Type House Office Sought: Disbursement For: Senate **Primary** General President Other (specify) State: District: SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

SCHEDULE C (FEC Form 3X)			1
LOANS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE 13 OF FORM 3X
NAME OF COMMITTEE (In Full) American Association	n of Private	Lenders PAC	(APL-PA)
LOAN SOURCE Full Name (Last, First,	Middle Initial)		ection: Primary General
Mailing Address	·		Other (specify) ▼
City Original Amount of Loan	State ZIP C Cumulative Payment T	o Date Balance	Outstanding at Close of This Period
Date Incurred		Interest Rate	Secured: % (apr) Yes No
List All Endorsers or Guarantors (if an 1. Full Name (Last, First, Middle Initial)	y) to Loan Source	Name of Employer	
Mailing Address		Occupation	
City State	e ZIP Code	Amount Guaranteed Outstanding:	a jungangangang ang ang ang
2. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	2 ad 12 ad 12 a
3. Full Name (Last, First, Middle Initial)	······································	Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	and the state of t
4. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	A Service of the serv
SUBTOTALS This Period This Page (option	<u> </u>		, , , , , , ,
Carry outstanding balance only to LINE 3,	Schedule D, for this line. If	no Schedule D. carry forward	to appropriate line of Summary.

SCHEDULE C-1 (FEC Form 3X) LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS

Supplementary for Information found on Page ____ of Schedule C

Federal Election Commission, Washington, D.C. 20463					
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER			
American Association of Privateledors PAC (ARL-PAC) [C10.0.5.4.7.3.98]					
LENDING INSTITUTION (LENDER)	Amount of Loan	Interest Hate (APH)			
Full Name					
Mailing Address	Date Incurred or Established	M. M. \ D. D. \ \ A.			
City State Zip Code	Date Due	La Land Lare of			
A. Has loan been restructured? No Yes	If yes, date originally incurred	W TW / D TO / P TO V TV			
B. If line of credit, Amount of this Draw:	Total Outstanding Balance:	The second secon			
C. Are other parties secondarily liable for the debt incurred No Yes (Endorsers and guarantors mu	ed? ust be reported on Schedule C.)				
D. Are any of the following pledged as collateral for the property, goods, negotiable instruments, certificates of stocks, accounts receivable, cash on deposit, or other	deposit, chattel papers,	What is the value of this collateral?			
No Yes If yes, specify:		Does the lender have a perfected security interest in it? \(\bigcap \) No \(\bigcap \) Yes			
E. Are any future contributions or future receipts of interest collateral for the loan? No Yes If yes, s		What is the estimated value?			
A depository account must be established pursuant to 11 CFR 100.82(e)(2) and 100.142(e)(2).	Location of account:				
Date account established:	Address:				
	City, State, Zip:				
F. If neither of the types of collateral described above wa the loan amount, state the basis upon which this loan	s pledged for this loan, or if the was made and the basis on wh	amount pledged does not equal or exceed ich it assures repayment.			
G. COMMITTEE TREASURER Typed Name Pick Abell Asst Treas Signature M. M. J.					
H. Attach a signed copy of the loan agreement.	Y [
TO BE SIGNED BY THE LENDING INSTITUTION: To the best of this institution's knowledge, the te are accurate as stated above.	I. TO BE SIGNED BY THE LENDING INSTITUTION: I. To the best of this institution's knowledge, the terms of the loan and other information regarding the extension of the loan.				
 II. The loan was made on terms and conditions (including interest rate) no more favorable at the time than those imposed similar extensions of credit to other borrowers of comparable credit worthiness. III. This institution is aware of the requirement that a loan must be made on a basis which assures repayment, and has 					
complied with the requirements set forth at 11 C AUTHORIZED REPRESENTATIVE					
Typed Name		IM · M } / , D · D ₂ / } Y Y · Y Y ;			
Signature Tit	le				

SCHEDULE D (FEC Form 3X) **DEBTS AND OBLIGATIONS**

(Use separate schedule(s) for each

PAGE OF FOR LINE NUMBER: (check only one)

XC	cluding Loans	numl	mbered line)			10
۸	me of committee (in full) merican Association of Private Landers Pr	AC	(APL	-PAC)		
	A. Full Name (Last, First, Middle Initial) of Debtor or Creditor	i		ebt (Purpose):		
	Mailing Address					
	City State Zip Code					
	Outstanding Balance Beginning This Period		Outota a dim	on Roleman et Class et J	Chia C	امنده
	Amount Incurred This Period Payment This Period		Outstandir	ng Balance at Close of 1	I NIS P	eriod
	B. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of D	ebt (Purpose):		1
	Mailing Address					
	City State Zip Code					
	Outstanding Balance Beginning This Period Amount Incurred This Period Payment This Period			ng Balance at Close of T	- ,	eriod
	C. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of De	ebt (Purpose):		
Ì	Mailing Address					
	City State Zip Code					
	Outstanding Balance Beginning This Period Amount Incurred This Period Payment This Period		Outstandin	g Balance at Close of T	his P	eriod
				· · · · · ·	•	
1)	SUBTOTALS This Period This Page (optional)	>	7 1	or so and a series		0
2)	TOTALS This Period (last page this line number only)	▶	1	, , , , , , , , , , , , , , , , , , ,		01
3)	TOTAL OUTSTANDING LOANS from Schedule C (last page only)	▶				0
4)	ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only	ly) ▶	1	. .		이

SCHEDULE E (FEC Form 3X)		
ITEMIZED INDEPENDENT EXPENDITURES		PAGE / OF / FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
American Association of Privately	eders PAC(A)	CO.054.7398
	Amends report f	₽ ₩ ₽ ₩ ₽ ₩ ₽ / ₽ ₽ ₽₽₽ ₽ ₩ / ₽ ₽₽₽₽₽₽
Full Name of Payee		Date of Public Distribution/Dissemination
		W. W. V. D. D. V. A.
Mailing Address		Amount
City State Zip	Code	
Oily State Zip	Code	handandes sentender de Sandandes de La Maria
Purpose of Expenditure		Date of Disbursement or Obligation
Ca	ategory/ Type	[Haw] \ [DaD] \ \(\text{Assay}
Name of Federal Candidate	Support O	ffice Sought: House District:
	Oppose [President Senate State:
Calendar Year-To-Date	D)	isbursement For: Primary General
Per Election for Office Sought		Other (specify)
Full Name of Payee		Date of Public Distribution/Dissemination
}		KI II I D D I Y Y T Y T Y
Mailing Address		
		Amount
City State Zip	Code	
		Date of Disbursement or Obligation
Purpose of Expenditure Ca	ategory/ Type	Maka / DaD / Asyadad
Name of Federal Candidate	Support O	ffice Sought: House District:
	Oppose	President Senate State:
Calendar Year-To-Date		isbursement For: Primary General
Per Election for Office Sought		Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures		. 0
		brokenska Darbon & Washington Carlon
(b) SUBTOTAL of Uniternized Independent Expenditures	······	0
		Brown Brown Committee of the Committee o
(c) TOTAL Independent Expenditures	·····	
Under penalty of perjury I certify that the independent expenditures repo with, or at the request or suggestion of, any candidate or authorized con party committee) any political party committee or its agent.	orted herein were not nmittee or agent of eit	made in cooperation, consultation, or concert ther, or (if the reporting entity is not a political
Signature	Date	10/19/2015

SCHEDULE F (FEC Form 3X) ITEMIZED COORDINATED PARTY EXPENDITURES MADE BY POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S) ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE

ON BEHALF OF CANDIDATES FOR F		PAGE OF		
(2 U.S.C. §441a(d)) (To be used	only by Political Committees in the Ger	neral Election)	FOR LINE 25 OF FORM 3X	
	Private Lenders PAC		A()	
Has your committee been designated to make coordinated expenditures by a political party committee YES NO				
If YES, name the designating committee:	Mailing Address			
	City	Stat		
Full Name (Last, First, Middle Initial) of Each Pay	/ee	Purpose of Expe	Category/	
Mailing Address		Date	Туре	
	tate Zip Code	[THE A PROPERTY OF STREET	
Name of Federal Candidate Supported Office S	<u> </u>	Amount		
	Senate District:	1		
Aggregate General Election Expenditure for this Candidate	Tourism should not stored	Lucyallanahan() ha	of makend? imake makend; 'small male	
Full Name (Last, First, Middle Initial) of Each Pay	ee	Purpose of Expe	nditure Category/	
Mailing Address			Туре	
	tate Zip Code	Date	**************************************	
Name of Federal Candidate Supported Office So	ought: House State: District: Presidential	Amount	A	
Aggregate General Election Expenditure for this Candidate	Annah Annah Mandanah Caran	<u> </u>	أحداثه المحادث المحادثة المحاد	
Full Name (Last, First, Middle Initial) of Each Payer	ee	Purpose of Exper	Category/	
Mailing Address		Date	Type	
	tate Zip Code	H-H/D	· D / Y · Y · Y · Y	
Name of Federal Candidate Supported Office So	ought: House State: District: Presidential	Amount		
Aggregate General Election Expenditure for this Candidate				
SUBTOTAL of Expenditures This Page (optional)	·····	1		
TOTAL This Period (last page this line number only).				

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10/14/2015

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No Postmark	
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Received from House Records & Registration Office	Date of Receipt
Received from Senate Public Records Office	Date of Receipt
Received from Electronic Filing Office	Date of Receipt
Other (Specify):	eceipt or Postmarked
PREPARER	10/15/15 DATE PREPARED
(3/2015)	